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ABSTRACT

The report examines the status of special education in St. Louis (Missouri) Public Schools. Census data are reported by primary handicap, age, and principle type of service received. Difficulties in the process of diagnosis and assignment of handicap category are revealed, including confusion over eligibility for learning disabled (LD) and educable mentally retarded (EMR) placements. Further time lags associated with the referral process are noted, despite an overall trend toward a more efficient prereferral process at the building level. Difficulties in the district's screening process and followup are analyzed, as are continuing concerns over the increasing number of students classified as LD. High school resource programs for moderately to mildly handicapped students are explained to present scheduling, attendance, and caseload management problems. Recommendations are offered including granting credit for appropriate resource room participation and promoting a higher level of student participation in Individualized Education Program conferences. A cooperative program serving students with severe behavior problems is evaluated. A prospectus for 1984-85 lists areas of evaluation and research need. (CL)

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SPECIAL EDUCATION REPORT

1983-84

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SPECIAL EDUCATION REPORT

1983-84

A Report to the Board of Education

by

Roger H. Edwards

**Jerry Powers, Director
Division of Evaluation**

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Introduction

The 1980-81 Special Education report indicated that the computerized management of student records and other applications of computer technology were critical needs for the Division of Special Education. Specifically, it was noted that computerization was necessary to adequately monitor compliance with Public Law 94-142.

During 1981-82 a prototype of a computerized record keeping system was designed and implemented with the help of the Information Support Services unit. It soon became clear, however, that Special Education and ISS personnel could not interact with the regularity needed to develop the system to a sufficiently comprehensive level.

As such a management system would also greatly enhance Evaluation's ability to monitor the LEA's Public Law 94-142 compliance, a significant part of the past two year's efforts have been devoted to helping develop Special Education's information handling capabilities. This has resulted in many mutually beneficial procedures and much computer software meeting the common needs of the two divisions.

As of the spring of 1984, much of this work has been completed. TRACK3, the computerized system designed to meet Special Education's data handling needs, contains over 3.3 million bytes of current and historical information on 12,768 St. Louis students who have had some association with the special

education program. The UPTRACK system links the TRACK3 files to the master files of the Student Accounting Office and produces bi-weekly reports calling problems and potential problems to the attention of special education personnel. UPTRACK and the TRACK3 maintenance software work together to prevent a number of potential violations of the local and State P.L.94-142 compliance plans. When questionable transactions are attempted in the TRACK3 file, appropriate operator warnings are given and the initials of the persons initiating and entering the transaction are recorded in the student's record. Special reports to teachers and psychologists warn them of impending student needs such as a new Individual Education Program (IEP) or re-evaluation.

As of this spring, certain special education forms can be generated through TRACK3. Other linkages to the master files have been created which simplify the process by which the fall assignment of handicapped students is made and smooth student transitions between the special and regular programs. A routine for analyzing certain test scores and an objective bank have been linked in a program that will allow the development of a valid IEP in a matter of minutes. We have also aided in the development of a health records file including speech and language screening results which are captured and updated through document scanning.

We have not attempted to document all of our computerization

activities in the following report as the result would be long, sometimes technical, and of minimal interest to most readers. Anyone wishing further details about TRACK3 and its numerous spinoff files, reports, and procedures is invited to contact the the Division of Evaluation and Research for information or demonstration.

In 1984-85 the Division will decrease the time spent on the development of monitoring and information handling systems, but we know that the time spent in the computerization process will pay ongoing dividends to both Divisions through their increased ability to monitor the special education program. We hope that the Office of Special Education will support the system that has been developed by allocating the additional personnel and equipment needed to take full advantage of its many unique capabilities.

Special Education in St. Louis--A Demographic Look

The Annual Census of the Handicapped

Public Law 94-142 stipulates that each LEA has the responsibility for conducting an annual census of handicapped persons between birth and age twenty-one who reside within its borders. This census includes not only those persons directly serviced by the LEA but those receiving help from parochial schools, private schools, and other agencies, State run or private.

Year-to-year variations in the data from the annual census stem from three major sources. Some of the variation reflects general changes in the composition of the handicapped population. These changes are the result of both normal demographics--people moving in and out of the city--and by changes in the incidence of the handicapping conditions. A second kind of change which may affect the reported population is modification of local or state policies regarding the handicapped. During 1983-84, for example, the State made changes in the categories of handicapping conditions used to report both the physically handicapped and mentally retarded populations. A third type of change reflected in the data is caused by variation in the reporting policies of city and county agencies serving the handicapped. While the overall level of cooperation among LEA's and these agencies is quite high, some agencies perceive a conflict between their

P.L.94-142 obligation to report information regarding the handicapped and legislation protecting the confidentiality of this information. With the help of the State, cooperation in the census effort is improving. For the time being, however, there may be spurious changes in the reported handicapped population due to an occasional lack of response from agencies over which the LEA has no control.

The census data from the past three years are presented in tables I through III which break down the handicapped population by primary handicap, age, and principal type of service received.

TABLE 1
Comparison of May 15 Handicapped Census Counts
for 1982, 1983, and 1984--By Age level

Age	May 15 Count of			Gain or Loss, 1983 to 1984	
	1982	1983	1984	Number	Per Cent
0	0	0	0	--	--
1	24	5	0	-5	-100
2	21	13	12	-1	-8
3	37	24	38	+14	+58
4	94	41	62	+21	+52
5	258	104	143	+39	+38
6	378	173	185	+12	+7
7	620	230	202	-28	-12
8	734	386	288	-98	-24
9	870	552	487	-65	-14
10	906	702	631	-71	-10
11	908	746	775	+29	+3
12	894	820	791	-29	-3
13	821	802	894	+92	+11
14	817	820	861	+41	+5
15	752	838	843	+5	+1
16	677	702	831	+129	+18
17	531	604	664	+60	+10
18	399	488	497	+11	+2
19	274	380	409	+29	+8
20	173	456	269	-187	-70
total	10188	8886	8882	-4	-0

TABLE II

Comparison of May 15 Handicapped Census Counts
for 1982, 1983, and 1984,
by Primary Status of Service

Status Code	Count			Gain or Loss, 1983 to 1984	
	1982	1983	1984	Number	Per Cent
31	25	4	45	+41	+1025
32	135	98	110	+12	+12
33	4257	3410	3353	-57	-2
34	4253	3814	3766	-48	-1
35	96	13	59	+46	+354
36	2	1	0	-1	-100
38	208	264	403	+139	+53
39	290	269	296	+27	+10
41	124	142	30	-112	-79
43	509	547	+500	-47	-9
45	21	27	2	-25	-92
46	211	277	298	+21	+8
47	40	5	5	0	0
48	9	6	15	+9	+150
50	0	1	0	-1	-100
51	1	2	0	-2	-100
52	5	0	0	0	0
53	2	4	0	-4	-100
total	10188	8886	8882	-4	-0

Key to Status Codes

31 - Services Not Needed	43 - State Programs
32 - Services Not Available	45 - Pre-School (0-2)
33 - Resource Rooms	46 - Pre-School (3-5)
34 - Self-contained	47 - Post-School
35 - Home Instruction	48 - Parental Objection to Placement
36 - Sheltered Workshop	50 - Too Severe Handicap
38 - Private Schools	51 - Excluded--Behavior
39 - Parochial Schools	52 - Excluded--Transportation
41 - State Institutions	53 - Not in School/Parent Objection

TABLE III
Comparison of May 15 Handicapped Census Counts
for 1982, 1983, and 1984
by Primary Handicapping Condition

HCC code	Count			Gain or Loss, 1983 to 1984	
	1982	1983	1984	Number	Per Cent
01	33	32	17	-15	-47
02	67	63	56	-7	-11
04	81	58	53	-5	-8
05	82	84	71	-13	-16
08	2563	1752	1380	-372	-21
14	3225	2727	2721	-6	-0
15	461 (a)	508 (a)	386	-122	-24
19	917	998	1097	+99	+10
21	2280	2404	2751	+347	+14
25	300	154	161	(b)	(b)
27	59	49	131	(b)	(b)
29	(b)	(b)	58	(b)	(b)
total	10188	8886	8882	-4	-0

Note a - Severe and profound retardation now represent one category used by the State of Missouri. The figures shown for 1982 and 1983 are restated.

Note b - Changes in definition at the State and local level for these three categories makes year-to-year comparison meaningless.

Key to Handicapping Conditions

1 - Blind	15 - Sev./Profound Retarded
2 - Partially Sighted	19 - Behaviorly Disordered
4 - Deaf	21 - Learning Disabled
5 - Hard of Hearing	25 - Physically Impaired
8 - Speech Impaired	27 - Other Health Impaired
14 - Educably Retarded	29 - Multiple Handicap

**The Annual Count of Children
Served by the Saint Louis Public Schools**

On December 1st of each year the St. Louis Public Schools conduct and submit to the State an unduplicated count of handicapped students being served by the LEA. This count is the basis for the disbursement of entitlement monies under P.L.94-142. The report of the count is broken down by principal handicap and age.

The 6753 students reported by the St. Louis Public Schools on this year's annual count came from five sources. The self-contained rooms and resource rooms of the St. Louis Public Schools accounted for 6518 students. The remaining students were attributable to the following programs:

1. Contractual placement of severely behavior disordered (SBD) students in approved agencies (125 students for the December 1, 1983 Count).
2. An after-school speech program for students attending parochial schools (39).
3. Instruction provided to children who were patients in St. Louis hospitals (24).
4. Instruction provided to children who were at home and unable to attend school due to extended illness or other physical disability (47).

The count reported to the State for December 1, 1983 is shown in Table IV:

Table IV

December 1 Child Counts of the St. Louis Public Schools
Showing Students Served by Primary Handicap, 1982 and 1983

<u>Type of Handicap</u>	<u>1982</u>	<u>1983</u>
Mental Retardation	2347	2429
Behavior Disorders	578	832
Speech Impaired	1714	1119
Orthopedically Handicapped	104	95
Partially Seeing	15	18
Blind	0	0
Hard of Hearing	44	44
Deaf	30	26
Specific Learning Disabilities	1833	2119
<u>Other Health Impaired</u>	<u>68</u>	<u>71</u>
Total	6733	6753

Discussion and Recommendations

In examining this year's census and child count data, the outstanding features noted were the decline in the number of speech students while the number of behavior disordered and learning disabled students served continued to climb. The two-year decline in the reported number of speech students is partly attributable to the efforts of speech therapists to initiate multidisciplinary evaluation of children suspected of having

other handicaps.* This step was recommended in the 1981-82 evaluation report and we are pleased with the efforts of the Speech Therapists to integrate their services with others of the Division of Special Education.

The increase in the number of students classified as learning disabled will be discussed separately as part of our ongoing analysis of this program. (See page 34.)

As part of the monitoring process for P.L.94-142, the Division of Evaluation and Research not only examines the census data but tries to also verify that the assignment of student handicap codes meets all of P.L.94-142's legal requirements. In recent years we have seen frequent use of a transaction which is well-intended and usually in the best interest of the student concerned, yet is still technically illegal. The typical circumstances are as follows:

A student is referred and evaluated. He exhibits symptoms associated with both a learning disability and a behavior disorder. It is the decision of the diagnostic team that his immediate needs would be best served by first concentrating on the student's behavioral problems. He is diagnosed as behavior disordered, assigned to a behavior disorders room and given

*When such a student is subsequently diagnosed as having another handicapping condition (e.g., a learning disability) he/she is then reported in that category even when speech services continue to be provided.

handicap code 1934.* After a period of service in the BD room, the teacher feels that the behavioral problem has been reduced and "reassigns" the student to an LD room with code 2134.

This is completely illegal and represents a violation of P.L.94-142's intent that all diagnostic decisions be made by a multidisciplinary team, not a single individual.** A variation of this practice in which a psychologist concurrently indicates agreement with the new diagnosis by filing an psychological addendum comes closer to the intent of the law but is still illegal.

This problem is easily correctable through noting the distinction between a special education program and the handicap codes of students served in the program. In the prior example, the student manifesting both LD and BD symptoms should be given handicap codes 1934 and 2134. (Note that the 2134 does not necessarily mean that services will be provided in a self-contained LD room.) Having so designated the student, a change in the locus of service to an LD room can be legally made without the reconvening of a diagnostic team.

*A Missouri handicap code is made up of two parts, the first pair of digits referring to the handicapping condition and the second pair to the type of service received. In this case the "19" means a behavior disorder and the "34" indicates service to be provided in a self-contained room.

**An exception to this rule for students whose only handicap is in the area of speech is also part of P.L.94-142.

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We have verified the legality of this procedure with the State's Division of Special Education. As long as the student's IEP speaks to all handicaps and this process of multiple handicap designations is not overused (with the intent of circumventing the law) it will help us to avoid possible legal entanglements. In cases where the diagnostic team decides on the assignment of a single handicap, subsequent changes in assignment should strictly follow the local compliance plan which calls for the reconvening of a diagnostic team. We strongly recommend that this process of assigning handicap codes by diagnosis (rather than placement) be instituted immediately to prevent possible citation for the misclassification of students.

A second problem in the area of diagnosis and the assignment of handicap codes relates to the area of retardation. As well as the unjustified changes of handicap noted above, our monitoring has also encountered a number of changes between the handicapping conditions of Learning Disabled and EMR. A word on the implications of such changes is in order.

The basic distinction between LD and EMR is based on I.Q. If a student's measured I.Q. is above 75 he or she is considered intellectually "normal" in Missouri and, in general, is not qualified to receive EMR services (including participation in the STEP program at the high school level). Conversely, when a student's measured I.Q. lies below 76, he/she is ineligible for service as Learning Disabled. On this basis it would appear

impossible to effect a change in handicapping condition for a student unless documentation of a change in measured I.Q. is provided.

An important exception provided to this rule occurs when a student's adaptive behavior--informally, the student's everyday "coping" skills--are in conflict with the I.Q. information. Example: The student has a measured I.Q. of 83 but has difficulty finding the correct bus to take to school. In this case, there might be sufficient justification for considering the student to be retarded despite the measured I.Q.

The problem we have observed locally is that students are sometimes classified (or reclassified) in one or the other category without sufficient justification. In one recently encountered case, a learning disabled student was reassigned to the STEP program based on a parental request.* This is not ample justification. The State would again have sufficient grounds in such a case to demand the return of P.L.94-142 monies expended on this student on the basis of his "misclassification." We

*This change of a high school student to the STEP program is one of the most frequently requested by teachers and psychologists as well. It is motivated by the fact that no self-contained services for LD or BD are provided in the high schools. After investigating various alternatives to the present pattern of providing services to high school age LD and BD students only through the resource room, we maintain the position that this is a viable mechanism if the resource program can be restructured to meet certain needs. This restructuring is discussed at length in the chapter on the high school resource program. (See page 41.)

recommend that the rules related to EMR and LD eligibility be clarified to psychologists to prevent the risk of such misclassifications in the future.

Referral, Evaluation, Diagnosis, and Placement.

The citing of this area of special education as a major problem goes back at least five years. The issue was discussed at some length in the 1981-82 report but, simply stated:

1. It has taken too long to complete the procedures necessary to have a student go from a regular school program to one which includes the needed special education services. This represents not only long periods of waiting for students but also implies frequent violations of the local and state compliance plans for P.L.94-142.

2. The delays associated with the referral process have caused special education to have a credibility gap with many regular classroom teachers. This situation, in turn, has contributed to a problem of non-referral of students who have an overwhelming need for special education services.

In the fall of 1981, the Division of Evaluation helped to initiate the convening of a large committee charged with recommending procedural changes in the referral, evaluation, diagnosis and placement of handicapped students (REDP). Following the work of this committee, REDP analysis is now broken into seven stages, each delineated by the completion or return of certain documents critical to the REDP process. The documents which outline these stages are summarized here with a brief description of the actions associated with this phase of the REDP process.

SE-1 - The student's regular teacher uses form SE-1 to request a school level meeting (prereferral conference) to discuss the possibility of referring the student for the full psychoeducational evaluation needed for placement in special education.

SE-5 - This form reports the results of the prereferral conference with a decision by the prereferral team as to whether a formal evaluation of the student is called for.

SE-6 - If the team's decision is to pursue a formal evaluation, this permission-to-evaluate form is sent to the student's parent or guardian. As the completion of this phase of the process is out of the hands of school personnel, the date associated with an SE-6 is the date of its return to the school.

SE-7 - When the parent or guardian has given permission for a formal psychoeducational evaluation of the student, the psychologist* conducts the evaluation and reports the results on this form.

SE-14 - When the psychologist's report and all other information relevant to the student are completed and brought together, a diagnostic conference is held and the results of that conference reported on this form. For students whose only handicap is speech impairment, a single discipline evaluation is conducted and the SE-14 is not used. Form SE-13 (the speech counterpart of form SE-7) is used to mark the end of the diagnostic stage for speech students.

Initial Individual Education Program (IEP) Conference - When the diagnostic conference indicates that special education services should be provided for the student, a draft IEP is written and a conference is convened to discuss with the parent the services to be provided.

SE-16 - When the participants in the IEP conference are in agreement as to the services to be provided, the parent gives permission for the student

*Throughout this report we use the terms "psychologist," "school psychologist," and "psychological examiner" interchangeably. Although, in practice, some distinctions between these positions are maintained in the St. Louis Public Schools, they are not critical to the content of this report.

to be placed in the program. As in the case of the SE-6, this part of the process is in the hands of the parent and the date associated with this document is the date of its receipt at the Office of Special Education.

SE-17 - When the parental permission-to-place has been received, the student is officially placed in the special education program through this Notice of Assignment. This marks the completion of the REDP process.

Using the dates associated with these documents, the analytical strategy for monitoring the REDP process is outlined in Table V:

Table V
Analysis Stages for Monitoring of the REDP Process

Stage	Name	Initiating Document	Terminal Document	Responsible Party	Time Allowed*
I	prereferral	SE-1	SE-5	teacher/prin.	15 (W)
II	eval/perm	SE-5	SE-6	parent	-----
III	evaluation	SE-6	SE-7	psychologist	20 (W)
IV	diagnosis	SE-7	SE-14	psychologist	10 (W)
V	IEP	SE-14	IEP	facilitator	30 (C)
VI	place/perm.	IEP	SE-16	parent	-----
VII	placement	SE-16	SE-17	facilitator	10 (W)
IV-S	diagnosis	SE-6	SE-14	psychologist	30 (C)**

Note: Form SE-13 replaces form SE-14 for "speech only" students.

*based on 1982-83 Compliance Plan: W=workdays, C=calendar days
 **This represents the State's definition of the diagnostic stage which differs somewhat from that used by the LEA. The State plan calls for a maximum of 30 calendar days between permission to test and the convening of the diagnostic committee (local stages III and IV).

To analyze the time lag data for the REDP process we examined the TRACK3 file information on each stage over the past two years.

The time lag for each stage was reported in either calendar days or work days, paralleling the way in which "allowable time" for the stage is set forth in the State or local P.L.94-142 compliance plan. To simplify the computation of work days, the calculations were based on a work year of nine months (without June, July, and August) with a six work day break given for the Christmas/New Year holiday season. Any period covering more than nine calendar days was assumed to have included the maximum possible number of weekend days for a period of that length. Except for the fact that no spring vacation is taken into consideration, nor miscellaneous one-day holidays, every step is taken to ensure that our analysis gives responsible personnel the "benefit-of-the-doubt." The data thus present what we feel to be a liberal estimate of the degree to which each phase of the REDP process is being accomplished in a timely manner.

Because many troublesome "carryover" cases are still in process when our annual report is made, we will henceforth use two types of comparison to assess the degree to which REDP time lines are being met. One set of comparisons will analyze cases that were in process a year ago versus those in process two years ago. These data will be considered as "final" figures for the years in question with all cases having completed processing. A

second set of comparisons will contrast the current year (as of mid May) with comparable data from a year ago in May. This procedure will allow judgments about the success of efforts during the current year without the bias of carryover cases affecting the comparison.

The final (restated) figures for cases processed in 1982-83 are compared to those of 1981-82 in the following table.

Table VI

Number of Days Consumed and Percentage of
"In Compliance" Cases in Each REDP Stage:
1981-82 vs. 1982-83 (restated)

Stage	Time allotted by compliance plan	1981-82		1982-83	
		Median (days)	%comp.*	Median (days)	%comp.*
I	15 (W)	20	48	10	61
II	not specified	20	--	10	--
III	20 (W)	70	15	44	27
IV	10 (W)	5	82	9	61
IV-S	30 (C)	107	15	76	15
V	30 (C)	21	65	41	40
VI	not specified	0	--	0	---**
VII	10 (W)	6	65	8	59

*the percentage of cases meeting the compliance criterion as set forth in the St. Louis Public Schools P.L.94-142 Compliance Plan for 1982-83

**The zeros reflect the fact that the majority of permissions are obtained "on the spot" after the IEP conference.

The data indicate, as projected in last year's report, that major problems were still in evidence at the diagnostic stage with only 15 percent of the cases meeting the State's more stringent criterion for timely diagnosis. Although the data indicate progress in reducing the number of grossly protracted cases (as indicated by the decreasing median days required at stages III and IV-S), the percentage of "in compliance" cases remained far too low in 1982-83.

The increasing time at stage V (the holding of the initial IEP conference) was largely the result of moving more conferences to field sites in 1982-83, a recommendation made by the State. This problem was discussed with administrative personnel at the Special Education Office this fall and, as will be seen in the next table, performance has been improved in 1983-84.

Table VII

Number of Days Consumed and Percentage of
"In Compliance" Cases in Each REDP Stage:
1982-83 vs. 1983-84 (May-to-May)

Stage	Time allotted by compliance plan	1982-83		1983-84	
		Median (days)	%comp.*	Median (days)	%comp.*
I	15 (W)	12	62	8	69
II	not specified(W)	10	--	4	--
III	20 (W)	30	35	11	71
IV	10 (W)	9	70	8	64
IV-S	30 (C)	76	15	27	54
V	30 (C)	47	41	27	55
VI	not specified(W)	0	--	0	---**
VII	10 (W)	7	63	2	85

*the percentage of cases meeting the compliance criterion as set forth in the St. Louis Public Schools P.L.94-142 Compliance Plan for 1983-84

**The zeros reflect the fact that the majority of permissions are obtained "on the spot" after the IEP conference.

Although the May-to-May comparisons are based on incomplete data for each year, there is again evidence of improvement in 1983-84.

Another important activity related to the REDP process is re-evaluations. P.L.94-142 requires that each handicapped child shall be re-evaluated every three years while receiving services.

Procedures to be used in the re-evaluation process are much like those in stages III and IV of the initial REDP process except there is no specific limit on allowable time. Re-evaluation responsibilities are the same as for stages III and IV of the REDP process with the psychologists responsible for all children except those whose sole handicapping condition is in the area of speech.

The re-evaluation data reported herein have two limitations:

1. The LEA is responsible for all re-evaluations of students living within its borders. The data reported herein are based only on those students served by the LEA either directly or under contract; students served in State Schools (the severely handicapped) are not included.

2. Some re-evaluations may have been completed but not yet reached the Special Education data processing coordinator for entry into the TRACK3 system by the time data were drawn for this study (June 22, 1984).

Records indicate that approximately 2300 re-evaluations were due during the 1983-84 school year. As of the study date, about

1600 of these re-evaluations had been completed. Of the approximately 700 uncompleted cases, over 200 had been overdue since January 1st, 1984.*

Discussion and Recommendations

There are again encouraging signs in the 1983-84 data. The time guidelines established in 1982-83 have improved efficiency at the school level (Stage I). While too many protracted cases are still in evidence (as seen in the fact that only 69% of the cases met the compliance plan's allotted time), the overall trend is clearly toward a more efficient prereferral process at the building level.

Of particular note is the reduction of time in the evaluation stage (Stage III). Psychologists again seem to have disposed of cases more quickly in 1983-84, helping to improve the overall speed of the REDP process. Their ability to meet the State's 30 calendar day rule at Stage IV-S remains far too low, however. It continues to be the worst stage both in time consumed and in violations of compliance plan time lines. After examining further data and discussing the situation with psychologists and other personnel involved in the REDP process,

*About half of the "long overdue" cases were speech students who had no initial evaluation date (form SE-13). As many speech students who began service in 1982 were entered into TRACK3 with incomplete data, it is likely that as many as 50 of these cases are not really "overdue" and just represent missing data.

the following points are seen as major contributors to Stage IV-S delays.

1. There is considerable variation in the number of cases processed by individual psychologists over the course of a year. While some variance can be explained by different types of assignments, illness and the like, there appear to be sizable differences in the productivity of individual psychologists.

This cannot be viewed as surprising, given the logistics of special education administration. For the past few years, psychological services personnel have been located in the area offices and thus removed from frequent interaction with the Special Education facilitators.*

As of next year the Pupil Personnel Services office will be reinstated and the psychologists again united under a single supervisor. Assuming that good communication between Special Education Division and the new Pupil Personnel Services Division is established, comprehensive monitoring of psychologists' REDP productivity and efficiency will then be possible. We recommend that the Pupil Personnel unit institute a process for monitoring individual productivity and efficiency in 1984-85.

2. The fact that psychologists work a six hour teacher day

*Technically psychologists have reported to the Director of Special Education although their work has been supervised by the Special Education Facilitators. In practice, they have largely been on their own recognizance, spending most of their time in the schools or in the area offices.

(rather than the eight hour administrative day) is contributory to the problem. While much of a psychologist's work day is spent in direct contact with students, considerable paperwork and report writing responsibilities are also involved. These could be completed during the hours when students are not attending school. A change in the psychologists' work day appears to be a more efficient solution to this problem than to simply hire more psychologists. We are aware of some potential problems that might be caused by a change in work schedule, but it is clear that something must be done to ensure the meeting of the P.L.94-142 time lines. We recommend that a more complete investigation of the feasibility of this change be undertaken.

We again emphasize as a limitation of this section of the report that there are still students for whom there is incomplete information in the TRACT3 system. As students cannot legally be placed in the Special Education program without completion of the documents used in the analysis of the REDP process, missing information is inexcusable. We recommend that any incomplete record coming to the Data Processing Coordinator at the Special Education office be returned to the party responsible for the missing information before any placement of the student is effected.

Overall, there is continuing evidence that Special Education has "turned the corner" in the REDP process. We are now seeing

many cases moving from SE-5 to placement in under 80 work days,* a task that has consumed up to 200 work days only two years ago. We will continue to monitor this area closely next year as much of the responsibility for these time lines falls to the Pupil Personnel Services Division.

*excluding time when the process is in the hands of the parent or guardian

Screening Follow-up Procedures

Background

The 1980-81 Special Education report from the Division of Evaluation and Research outlined one particularly serious problem. There was overwhelming evidence that large numbers of St. Louis Public School students who showed a possible need for special education services had never even been referred for evaluation of a possible handicap. Many had already been retained in grade at least once and were continuing their pattern of failure in the regular classroom with no concerted effort made to determine why. On investigation, at least two factors appeared to be contributory.

1. Many teachers said they were not referring children because of long delays in processing such cases. While the teacher would have much of the work to do to initiate the referral, he/she would never see any personal benefit in having the child reassigned from the class. It was easier for the teacher to simply pass the student along to the next room (where the next teacher might well do the same thing).

2. Although I.Q. and Achievement Test results had long been included as part of the screening program for Special Education, there were no formal follow-up procedures to ensure the use of these results as a basis for Special Education referral.

In 1982-83 the DOER undertook three projects aimed at solving the problem of non-referral. First, a study was made to

investigate the long-term effects of non-referral. The resulting report, "Effect of Non-referral of Potentially Handicapped Students," was appended to our 1982-83 report and provided strong evidence of the harm coming to our students as a result of this failure. Data from 1792 potential referrals in 1980 were examined to determine the relative attrition rates of students who had been evaluated and placed in an appropriate special education program versus those who had received no such services. The percentage of attrition for the served population was less than half of that for the unserved one.

Secondly, the TRACK3 system was implemented to provide for a much closer monitoring of the referral process time lines.

Lastly, as a result of the work of the previously discussed 1981 REDP Committee, the DOER was requested to establish and implement a formal screening follow-up procedure in 1982-83. The formal procedure was to augment, rather than replace, the informal process by which students were referred on the basis of perceived need and teacher initiative.

The tests used as screening instruments were the California Achievement Tests (for academic achievement) and the Cognitive Abilities Test (for intellectual functioning). Based on these tests, criteria for "failing" the screening were established as follows:

1. Potential Slow Learner--Two or three COGAT subscores below an I.Q. of 76 and one or more CAT percentiles below the 15th.

2. Potentially Learning Disabled--A verbal I.Q. 25 points less than the nonverbal I.Q. and one or more CAT percentiles below the fifteenth.

On the basis of these criteria and a created file of student records, lists of students meeting these criteria were first produced in the spring of 1983. A list was sent to each regular classroom where such students were present.

These screening forms asked the student's teacher to classify each student so listed as:

1. Previously referred for special education evaluation.
2. To become the subject of a prereferral conference (Form SE-1 to be initiated).
3. Functioning adequately in the regular classroom.

The form also required both a teacher and principal signature upon completion to emphasize the accountability of school personnel for referrals under P.L.94-142.

The spring 1983 notices covered 1021 students in grades three through seven and returns were received from the schools on 99 percent of those sent. Analysis of the returns showed that 21 percent of the listed students had been previously referred and about 25 percent were categorized by their teachers as making "adequate progress" in the regular classroom. The teachers indicated that approximately one-half of the listed students would be started in the prereferral process. As of the Special Education/P.L.94-142 report of 1982-83, the modifications in the screening process were judged to be successful.

Follow-up Study in 1983-84

During the 1983-84 school year the Division of Evaluation and Research investigated the effect of the notifications that had been sent out during the previous spring. The results were disappointing. In a random sample of students judged by their teachers as type 2 (in need of a prereferral conference) only about 10 percent had actually entered the prereferral process by the spring of 1984. The remainder had not been started despite the signed statements of teachers and principals that this would be done. In about five percent of the type 2 cases, this neglect was compounded by not only failing to refer the student but retaining him/her in the same grade for the next school year.

Another observation made during the investigation was that students listed on the notification form as potentially learning disabled were more likely to be referred than those listed as potential slow learners. Although the relatively small number of potential LD's makes this finding tentative, part of the under-referral problem may stem from the categorical labeling of special education students. Teachers appear to be reluctant to start a process that could end in a student being categorized as "retarded" while more willing to do so if the student is likely to be diagnosed as "learning disabled." Such a finding at the local level would be in agreement with the conclusions of other special education researchers nationally.

Discussion and Recommendations

On discussing tentative results of this follow-up study with the Director of Special Education during the winter, it was agreed that one problem in the screening program was the timing of the notices. If sent in the fall, they could be subject to close monitoring to ensure continuity of the follow-up efforts at the school level. This new timing of the screening notices and new, structured follow-up procedures will be introduced in the fall of 1984. The form will also be modified to minimize its categorical overtones.

The fundamental problem underlying poor implementation of the P.L.94-142-mandated screening program is a pernicious one and goes deeper than the timing or wording of screening notices. It is a serious problem in staff awareness on the part of regular teachers and is a major reason why Public Law 94-142 provided for this population in mandating a comprehensive staff development program as part of the law. Many of our regular classroom teachers appear to be unaware of the significance and meaning of P.L.94-142. They are thus unaware of the LEA's obligation to locate all handicapped and potentially handicapped youngsters. One step should be implemented immediately to prevent the most serious of the violations that have been pointed out. It is dismaying that teachers and principals should sign their names to a document attesting to a child's probable need for special services and then retain the child without any effort to

investigate this need. We recommend a city-wide policy that no child whose name appears on the annual screening list be subsequently retained without going through at least the school level (prereferral) stage of the REDP process. The impact of implementing this recommendation would be to ensure that a trained psychologist is a party to all retention decisions regarding students with possible handicaps. It would thus reduce the probability that a student be allowed to fail in school without due consideration of the reasons for such failure.

Learning Disabilities--An Area of Continuing Concern

In last year's report we expressed concern about the increasing number of students in the St. Louis Public Schools who are classified as "learning disabled." Further examination of this situation during the past year has not decreased this concern. With an additional 286 students being served as LD this year (see page 10), we see the problem of overidentification growing worse rather than improving. For those wishing background on the problem, we include as an appendix to this report some excerpts from last year's report.

To the information provided therein we briefly note the following information gathered during 1983-84.

1. The problem remains national in scope as was indicated in last year's report. Education of the Handicapped reported as follows in discussing the Education Department's 1984 report to the Congress regarding implementation of P.L.94-142:

"As in previous years, the increase in the number of children identified as "learning disabled" accounts for much of the overall rise (in the number of children served under the law), although the rate of growth appears to be slowing because of states' efforts to ensure that children are not erroneously classified..."

2. The diagnosed LD population served in the St. Louis Public Schools increased again in 1983-84, this time by 14 percent.

3. While the State of Missouri did incorporate guidelines for LD diagnosis during the past year, there is no indication that the State will monitor their use.

A key section of the guidelines, based on those of the federal government, contains the following exclusionary clause:

The team may not identify a student as having a specific learning disability if the severe discrepancy (between ability and achievement) is primarily the result of:

- A. A visual, hearing or motor handicap
- b. Mental retardation
- c. Emotional Disturbance
- d. Environmental, cultural, or economic disadvantage

It is this concept of "environmental, cultural, or economic disadvantage" which represents one of the main stumbling blocks in tightening up the definition of "learning disabled." While it is difficult--if not impossible--to prove that a particular learning deficit is the result of such factors, we would contend that these factors must exist in many L.D. students in St. Louis. The special education records which document the "learning disability" often simultaneously document backgrounds characterized by "environmental, cultural and economic disadvantage." More importantly, the writer knows of no case where a student has been deprived of services in the LD program on the basis of the exclusionary clause, which seems remarkable considering the number of cases processed in St. Louis.

A statement to the evaluator by one of our psychologists during an informal discussion this year characterizes quite well the dilemma of providing services to the LD student. In discussing a particular case, the psychologist said, "Of course he's not really learning disabled but he is way behind

academically and if he doesn't get help from us, where will he get it?"

There is both logic and good intentions in this statement made by a dedicated professional. But other factors must also be considered:

A. Do we have the right to attach a label of questionable validity to a child because (1) we believe that he/she may benefit from it (but have no evidence to substantiate the belief), and (2) the label appears less stigmatizing than one of "retarded?"

B. Do we have evidence to show that the services we would provide to this student are beneficial and cost-effective in cases where the diagnosis may not follow proper guidelines? There is a considerable body of evidence from around the country (in addition to that which we are providing) that the answer is "no."

LD "treatments intended to fix underlying processing deficits are of questionable validity even for correctly identified LD cases and they are surely inappropriate for slow learners and bilingual children who have been labeled LD. ...The excessive costs of identification (which take away half of the extra resource gained), the harmful effects of labeling and the inappropriateness of treatments are negative effects of overidentification that outweigh the good effect of remedial help. Remedial programs that do not require a handicapped label and a wider repertoire of skills for regular classroom teachers would be a preferred way to achieve the good ends without the negative consequences.*

*Shepard, L. Assessment of Learning Disabilities ERIC/TM report no. 84. Princeton: ERIC Clearinghouse on Tests, Measurement, and Evaluation

Some authors have gone so far as to suggest that 'learning disabled' has become a way of blaming children for what is actually the failure of the schools to provide adequate education.

4. Our concern about the possible overidentification of LD students is not just a matter of legality or ethics. There is evidence that harm is being done to the student inappropriately placed in an LD program.

Last year's study of attrition rates* in the high school special education population in St. Louis serves as an example. (See Appendix B.) This study was continued in 1983-84 using the same sample. As of this spring, half of the students in the sample were of an age suggesting they should have graduated from high school. On this basis the sample of both LD students and STEP (high school EMR) students was split into two parts to more clearly focus the results. Cohort groups I and II (who should have graduated by June, 1984) were analyzed first. Using the same definitions and methodology as employed in last year's report, we calculated an estimated four-year attrition rate of 64 percent for the 45 students in the LD group. The estimated graduation rate was 11 percent.

*The 1982-83 Special Education report used the term "dropout rate" to indicate the percentage of students having certain withdrawal codes on the student data base. Because different codes are used in other reports concerning "dropouts," we will use the term "attrition rate" in this study to avoid confusion. The concept of "attrition" used herein has the same operational definition as "dropout" did in the 1982-83 report.

We next proceeded to analyze the data for the 59 STEP (EMR) students in cohorts I and II. The same analytic technique lead to an estimated attrition rate of 49 percent for this group. The graduation rate was 14 percent.

Comparable four-year figures for non-handicapped students in this period were a 46 percent attrition rate and a 25 percent graduation rate.

Cohorts III and IV (students who by virtue of their age should be juniors and seniors during 1984-85) were analyzed next. The data showed that 51 percent of the 66 LD students have already dropped out while the rate for 43 STEP students is 42 percent.

As these data indicated a high attrition rate for learning disabled students in their early high school years, a problem in making a smooth transition from middle school to high school was suggested. We therefore continued our investigation of attrition rates to determine what effects could be observed during the transitional year, 9th grade, and how these effects might relate to the type of service received in the middle school. The records of students who entered school in the fall of 1983 as ninth graders were analyzed to determine the type of service received in middle school and current status. For students classified as learning disabled the study showed a 26 percent attrition rate for those coming from self-contained classes versus 19 percent for students who had only received resource

help in the middle schools. In the behavior disordered population the difference was even more dramatic, 33 percent versus 12 percent.

The determination of causality is obviously difficult in this situation. Students coming from self-contained classes to general status (with help from a resource room teacher) not only face the problem of transition but--at least theoretically--are more seriously handicapped to begin with. This clearly makes it impossible to state that it is solely the transitional problem which leads to the higher attrition rate. This explanation does seem warranted, however, if only as a matter of logic: We cannot expect students to go from the high structure, low pupil/teacher ratio setting of the middle school learning disabilities room to the high school's typically low structure, high ratio setting without numerous casualties. The possibility that many of these students should not have entered the program makes the situation all the more serious. We will further discuss this problem in our analysis of the high school resource rooms.

5. We are suspicious that the prevalence of "pseudo-LD's" in our system results in diminished and/or improper service to those genuine LD's who have more specific learning problems. We have seen more than one case where a specific disability was ignored in planning the services given to a student. For example, we investigated one situation where a student with a confirmed problem in dealing in quantities was assumed to be a

"typical LD" and given only remedial reading instruction. Reading comprehension, in fact, was shown by this student's record to be his strongest area.

6. Two changes have been made in the local 1984-85 Compliance Plan which should help Special Education speak to the overidentification problem: The exclusionary clause is now explicitly stated in the plan and a minimum I.Q. of 85 has been established for entry into the LD program. While these steps may not represent a final solution to the LD problem, they do represent an important local effort to "tighten up."

The DOER will monitor adherence to these new local guidelines in 1984-85. In addition, we recommend that all psychologists who serve the St. Louis Public Schools be exposed to current trends in the field of LD identification and to a growing body of literature pointing to the harmful effects of LD overidentification. The Division of Evaluation and Research would be very willing to work with the Pupil Personnel Services unit toward this end.

Special Education in the High Schools--

The Resource Program

Background

The 1981-82 Special Education report cited the high school special education program as a source of concern and called for its further study over the next two years. Last year we examined the STEP (Student to Employment) Program in some detail and made a number of recommendations for its improvement.* During 1983-84 our emphasis was to be on the resource room program which provides assistance from one to five periods per week for mildly-to-moderately handicapped secondary students.

As we made our initial examination of the high school program in 1982-83, one overriding problem associated with resource rooms surfaced. Resource services were not even scheduled for many students who had valid IEP's that called for them and other students who were scheduled for resource room time came there only sporadically. This erratic pattern of service delivery was seen as significant in two ways. First, it indicated that many violations of P.L.94-142 were taking place in the high schools which could subject the district to losses of entitlement monies. Secondly, our finding of an excessively high

*These recommendations have yet to be acted on. The STEP program remains in need of both coordination and a sweeping revision of curriculum. The Curriculum Services Division should undertake such a revision immediately.

attrition rate for high school LD's (discussed in the previous chapter) could well be related to problems in resource room service as all LD and BD students in the high schools are served through this program.

While it was our original hope to speak in some detail to the question of instructional quality in all high school programs, our preliminary work on the resource program in 1982-83 thus indicated that focusing on the question of instructional quality would avoid the program's most fundamental need. This was to ensure that students whose IEP's call for instruction in the resource room are there to receive it. Because solutions to the logistical problems of resource room service would be necessary before a meaningful examination of instruction could be made, the emphasis for evaluative study this year was to find potential solutions to the problems associated with resource room attendance.

1983-84 Findings

The high school resource program was designed to provide help for moderately to mildly handicapped students in the areas of retardation, learning disabilities and behavior/emotional disorders. Medium-to-large high schools in St. Louis have two resource room teachers on the staff. Smaller high schools may have only one. As the State sets a maximum caseload of 20 students to be served by the resource room teacher, not more than 40 students can be served in the larger schools and twenty in the smaller ones.

At the beginning of the school year, the resource room teachers meet with those students who are to receive resource services. They then work with the academic counselors of these students to establish the service as part of the students' school schedule.

Most students come to the resource room for one period per day if their schedules can be appropriately arranged. No high school credit is given for work in the resource room.

The specific services to the student vary greatly. Some of this variation is normal and properly reflects different needs on the part of different students. Many students (as previously noted in our discussion of learning disabilities) receive what amounts to remedial reading instruction. In other cases more unique patterns of resource service are in evidence. These include the resource room teacher providing tutorial services for handicapped students taking advanced courses or providing basic instruction in a scheduled course (i.e., the student's schedule indicates attendance in a regular course but, in reality, he/she is in the resource room during that period).*

Prior to each high school resource room visit made during the year, rosters were produced through the TRACK3 special education data base listing all students in the school were were

*This mechanism has sometimes been used as a way of granting credit for time spent in the resource room. While illegal in this form, we will later discuss conditions under which a similar system can be legally implemented.

scheduled to be receiving resource services. At each location we went over the roster with the resource teacher(s) and did follow-ups on some students whose actual level of service differed from that expected. The following conclusions were drawn:

Cases of sporadic attendance or complete non-attendance appeared to have come about in the following ways:

1. A resource caseload consists of those students assigned to the resource teacher by the Office of Special Education on Form SE-17, the Notice of Assignment. When resource students transfer from one public school to another there has been no clear cut responsibility for initiating their reassignment to a new caseload. The students themselves have little motivation to do so as they receive no credit for the time spent in the resource program. The resource teacher at the school where services were formerly provided typically does not know where a transferred student has gone. The resource teacher in the student's current school has often not been notified as to which, if any, new students at the school have IEP's calling for the provision of resource services. In short, many students who should be receiving services have become "lost" to the resource program when they transfer between schools. As a result IEP's have not been fulfilled and students have failed to receive prescribed services.

2. Even when a resource teacher is aware that a student needing services has entered the school, the provision of such

services may be impossible because the program is already operating with the State-allowed maximum caseload of twenty students per teacher. In these cases the teacher is therefore in a position of non-compliance regardless of how the individual case is handled. Adding the student creates an overload and failure to add means that the student's IEP is not being implemented, either of which is a compliance violation.

The whole area of caseload management is a difficult one for resource teachers. As well as finding many cases of students not being scheduled for service due to the danger of creating an overload, we encountered many cases where services were being provided for students whose need seemed minimal. In discussing such cases with resource teachers, we were usually told that although their need for resource support had become nominal, these students could not be "exited" from service as they still needed occasional academic counseling or, sometimes, simply moral support. The teachers feared that if they actually deleted such students from the caseload via an "exit IEP" that they could not legally work with the student at all.*

3. The scheduling of students often presents insolvable problems. As resource service is not viewed as a "subject", all arrangements are made after the student's academic schedule has

*This is correct because resource teachers salaries are partly supported through State monies which are based on full-time provision of services to the handicapped.

been set. The resource teachers must then make individual arrangements for each student. If the student has a scheduled study hall, the process is usually easy. When the student has no such free time, however, the resource teacher often depends on the good will of regular teachers to allow the service to be provided by "pulling out" from a regular class.

Further complications have been caused by the State's insistence on categorical service to the handicapped. Students with different handicapping conditions have not been allowed to receive service at the same time even if the material and topics on which they are working were identical. This also has created many scheduling problems such as when a "resource BD" student who has only 6th period free may not be able to be scheduled if that period has already been set aside for a group of LD students.

The State's 1985-88 Compliance Plan for P.L.94-142 indicates that Missouri will permit multi-categorical groupings for service as of the next school year and eliminate this particular problem source.

4. A significant number of resource students have poor school attendance records. A few simply do not come to the resource room or come erratically after they have been scheduled. The fact that no credit is given for the time students spend in this program makes some feel they are being penalized rather than helped. They perceive themselves as being forced to take a zero credit class and lessen the probability that they will be able to

obtain enough credits to graduate. The second class, no-credit status of the resource program also makes it difficult to get the cooperation of counselors and administrators to help to enforce attendance standards. Attendance in the resource room is simply not seen as a high priority.

In many cases it is likewise difficult to get parental cooperation. Many parents do not attend IEP conferences even after receiving ample notification. Students themselves are also infrequent participants.

The net result of these factors is to have some students for whom the district has contracted to provide services and who are occupying a place on the resource caseload but receiving little or no service. These students represent a double problem in that they not only get no help for themselves but also may deprive other students from receiving service.

5. When we shared our data on attrition rates with resource teachers they did not appear to be particularly surprised. It was the consensus of most resource teachers that the transition from self-contained services in the middle school to resource services in the high school was indeed critical. Students making this transition were not only faced with the logistical problems noted above. They had the additional task of coping with them simultaneously with rejoining the mainstream of education after as much as eight years of self-contained service in the elementary and middle schools. When we consider that almost all

of a student's academic life may have been spent in a room with nine (or less) other students and a familiar teacher who understood the student and the particular problems that led to handicapped classification, it is easy to see the trauma of the high school transition.

High school resource teachers also felt that many middle school teachers lacked an adequate understanding of the problems the 9th grade student faces in making this transition. This lack of understanding surfaced in IEP's (The IEP's of ninth grade resource students are usually written during the previous spring by the students' middle school teachers) and in the lack of mainstreaming provisions in middle school IEP's which could serve to make the transition to the high school less abrupt.

Discussion and Recommendations

1. The inability of the resource teacher to grant credit for work done in the resource program is an important issue. It influences the students' attitudes toward the importance of the services they receive and toward school as a whole. More subtly, it influences the attitudes of resource teachers and other school professionals toward the resource room and the entire special education program.

The most unfortunate aspect of this situation, however, is that "no credit for resource" is more of a St. Louis tradition than a matter of regulation. The Handbook for Classification and Accreditation of Public School Districts in Missouri states that:

"Local school boards shall establish requirements for special education students and may make necessary exceptions in specific requirements for transfer students."

The handbook goes on to interpret this requirement in the following manner:

1. The local board of education shall establish requirements that are compatible with each special education student's ability to perform and may waive specific requirements, or may require specific courses when it is determined to be in the best interests of the special education or handicapped child to do so.

Examples:

A student with speech difficulty may be permitted to substitute a speech therapy class in lieu of a conventional language arts class.

A student who is academically retarded may be permitted to participate in a reading skills development class or special classes in writing, spelling, and speaking in lieu of conventional language arts classes.

A student who is mentally retarded may be permitted to participate in supervised on-the-job training in lieu of specific high school courses normally required for high school graduation.

It is quite clear that inadequate attention has been paid to this requirement. Implementing a credit granting procedure would serve to increase student motivation and solve a number of attitudinal problems related to the provision of resource services.

We would quickly point out that all resource services cannot be provided on a credit basis. As a rule of thumb, credit cannot be granted when a) the help received is tutorial in nature (In this case we are already providing the opportunity for the

handicapped student to earn the credits needed for graduation and our obligation to the student has been met.), or b) the work is strictly remedial in nature.

When resource services are being provided in lieu of a developmental course, however, credit should be granted when a reasonable case can be made that the student would have a minimal chance to receive credit for that course due to the nature of his or her handicap.

Clearly much work will have to be done to establish well-defined guidelines regarding the granting of credit for various aspects of the special education curriculum. But it is not just a matter of an instructional improvement that is being recommended here: It is a matter of living up to an obligation mandated by the State of Missouri.

To pave the way for the granting of credit for appropriate portions of the special education program, we recommend that the following steps be taken:

A. The Board, as recommended in the State Handbook, should take an official position on the granting of high school credit for services to the handicapped. This position should incorporate the Board's recognition of the student's IEP as the controlling document for the granting of such credit (thus allowing special education policies to determine when credit can be given for a particular student and a particular course of study).

B. The Division of Special Education should establish guidelines for the granting of credit in all areas,* with particular emphasis on the problems associated with speech therapy and work in the resource room which may be partly remedial.

2. Resource services should be a scheduled academic period rather than just an "arrangement." Working with the curriculum unit and the data processing division, we have already taken the necessary steps to have three non-credit courses listed in the master scheduling list: Resource Services for the Behaviorally Disordered, Resource Services for the Learning Disabled, and Resource Services for the Mildly Retarded. Due to the freeing up of restrictions related to categorical service and possibility of granting credit for certain services (as per the previous recommendation), the ultimate status of the resource program with respect to scheduling may be to have only two designations: Resource service for credit and resource service without credit. The Division of Special Education should finalize these arrangements with the Curriculum and Data Processing Divisions upon resolution of the credit issue and completion of multi-categorical service guidelines for resource teachers.

3. The effect of the 20 students-per-teacher caseload is harmful to the resource program. Regardless of the severity of

*Credit is already granted for participation in the STEP program despite that no formal position has been taken by the Board.

handicap, each student currently represents five percent of a teacher's caseload. This sometimes results in serving students who have a minimal need and providing no service to students with a greater need. In discussing this situation with officials of the State Department of Special Education it was agreed that St. Louis should request a variance on caseloads for the high school resource program, basing a caseload on student contact hours rather than total number served. Such an exception would enable resource teachers to better meet student needs by writing IEP's that allow students to be scheduled for as little as one period per week. Such students would thus represent approximately one percent of a caseload rather than five percent. This variance would not only solve most of the problems brought on by the caseload limitations but would allow St. Louis to display a broader continuum of services to the handicapped. Teachers would have the flexibility to schedule students in a way that reflects true service needs. As many as 15 periods per week could be provided under this system.

We have every reason to believe that the State would look favorably on this exception and recommend that immediate steps be taken to apply for a caseload based on 100 student-contact hours per week.

4. The problem of "losing" resource students as a result of transfers between schools has already been spoken to. As of this spring, TRACK3 procedures were created to automate the

reassignment process in the following manner: When the bi-weekly run of the UPTRACK procedure is made,* the detection of a school-to-school transfer by a resource student brings his record to the terminal screen. If the transfer is a "normal" one, the operator, by pressing a single key, sends relevant information to a new file, SE17C. When this file is later input to a processing program--usually within 48 hours--three copies of form SE-17 are generated with one going to the student's new teacher. This process has virtually eliminated the "lost" resource student.

5. The problem of apathetic, infrequently-served students occupying space on the caseloads is a particularly difficult one. The granting of credit for certain resource work and enforcement of attendance standards may solve some of the problem but not all of it. We suggest that a higher level of student participation in IEP conferences would be of value in these situations. A student who knows exactly why he is coming to the resource room is more likely to attend regularly than one who does not. If such participation ends in a blanket refusal of services, a parental conference would be in order. The unified efforts of parent and teacher might clear up the problem or a note from the parent signifying such a refusal on their part would at least free the district of its obligation to provide services.

*UPTRACK is the major automated update procedure built into TRACK3 which shares information with the central electronic files kept on all St. Louis Public School students. For further information consult the 1982-83 Special Education report.

6. The problem of poor transitions between self-contained services in the middle schools and resource help in the high school cannot be solved within the resource room itself. Implementation of the above recommendation will help but, in addition, we recommend that the following steps be taken at the middle school level.

A. IEP's of students entering their final year of service in self-contained middle school classrooms should contain a significant amount of academic mainstreaming. While implementation of this recommendation will undoubtedly be unpopular with many regular staff members in the middle schools, this step is needed if we expect students to make an appropriate transition to the high school. This represents just another example of what we have noted previously in this report: The success of the special education program frequently rests upon the understanding of regular teachers.

B. Special Education Teachers in the middle schools need to be informed of the transitional problems that special education students face in entering high school. The IEP of a student entering high school and scheduled for resource service should specifically speak to the student's probable ability to handle this transition (maturity, etc.). It should also contain specific objectives in the area of behavior that will focus the high school resource teacher's efforts to ensure that the student makes this transition smoothly. IEP's containing only a

smattering of reading and arithmetic goals are of no use when the student for whom they were intended is out on the street rather than in school.

7. The problems we have noted herein have taken their toll on the attitudes of some of the resource teachers themselves. It is difficult for teachers to function at their best when so few people see what they do as important. Once the previous recommendations have been acted on, the entire resource program-- elementary through high school--should be examined from an instructional standpoint to ensure that appropriate services are being written into IEP's and that the IEP's are being turned into effective classroom instruction.

The Hawthorn Cooperative Day Treatment Program--

A P.L.94-142 Discretionary Project for 1983-84

Students with severe behavioral or emotional disorders are not served in the St. Louis Public Schools. Some students have problems which are severe enough to necessitate their being institutionalized or incarcerated. There are many others, however, whose behavioral problems place them between the realm of special education in the public schools and these more extreme arrangements. Most of these students are served by contractual arrangements with cooperating agencies and programs. During the past school year, however, discretionary monies were sought and received to expand services to this population through a unique cooperative arrangement between the public schools and an external agency.

Under the discretionary grant, up to 20 students in the 12-to-18 year age range were to be served through the Cooperative Day Treatment Program (CDTP), a joint effort of the St. Louis Public Schools and Hawthorn Children's Psychiatric Hospital.* The 1983-84 grant proposal called for a cooperative effort between the two parties: The Board provided three full-time behavior disorder teachers, educational materials, supplies and

*Hawthorn, while formerly a part of the State Hospital complex in South St. Louis, now functions independently of the hospital with lines directly to the State Department of Mental Health.

transportation; Hawthorn provided the site and the services of a Treatment Coordinator, a clinical psychologist, a psychiatric social worker and an aide. This range of special skills and a low student/teacher ratio made for a combination of educational individualization, parent training, and therapy previously unavailable to severely behavior disordered adolescents in St. Louis.

To determine the effectiveness of the first year of the CDTP, we interviewed the Executive Director of Hawthorn Children's Psychiatric Hospital, the Treatment Coordinator of the CDTP, and the three teachers provided by the Board of Education. We also did informal observation in the three classrooms.

Results and Conclusions

We were favorably impressed with the facilities and personnel provided by Hawthorn. The building housing the program is relatively new and well suited to its purpose. The kinds of services provided by the Hawthorn staff are appropriate to the needs of the student population and, from all indications, were delivered in a timely and professional manner.

The educational materials provided by the Board were ample and appropriate to the educational task and the transportation system--a frequent problem when dealing with students of this nature--appeared to be effective. The teachers, despite being new to the school system, and, in one case, having little teaching experience, appeared to maintain good control and

provide the level of individual education called for in the grant proposal.

Our examination of the CDTP did turn up problem areas. The most important of these was the level of program utilization. The first student was not accepted into the CDTP until December, 1983. Since then twelve others have been enrolled but the rise in children served has been gradual until May.

Any agency to which the Division of Special Education refers cases has the right of refusal if the agency feels that their program is not appropriate to the needs of the particular student. In the case of CTDP we feel that this right may have been overused. One of the grounds upon which cases have been rejected is based on the idea that psychiatric services such as those provided by Hawthorn have maximum impact when a high level of parent cooperation can be achieved. Despite the truth of this assertion, we do not accept the probable lack of such parental cooperation as a legitimate reason to refuse services to a potential student client. If certain students are not served in CDTP, they will be unlikely to ever obtain the psychotherapeutic help they need without full-time institutionalization. Furthermore, many SBD students in St. Louis have long histories of parental neglect that have contributed to their present classification. To use these same grounds as cause for not helping such students seems inappropriate even if this neglect makes the student's overall prognosis more bleak.

A second reason for not serving students appears to have been a fine line distinction between the "emotionally disturbed" student and the student who simply has "inadequate socialization skills." Given the present level of knowledge concerning human behavior, we find it difficult to accept that a student can be refused service in a program such as CDTF because "poor socialization skills" is the major presenting symptom. The fact that a student's behavior problem is sufficiently serious to prevent effective education in a self-contained classroom by a certified teacher of the behavior disordered should speak for itself: We do not feel that services should be denied because there has been no known attempt at suicide or homicide, or evidence of psychosis.

While we do acknowledge both parental cooperation and "present danger" as potential bases for establishing priorities for service/treatment, we feel that a publicly funded program that is not operating at capacity should rarely, if ever, use them as a basis for determining who is to be served.

A second reservation about the program stems from the lack of teacher aides. While Hawthorn did provide one educational aide position for the program in 1983-84, this would clearly be inadequate if the program were to serve more students. When dealing with severe emotional disturbances, at least one "time out" room is a necessity and such a room must be staffed. If a student "acts out" in the classroom, someone must oversee his

redeployment to the "time out" area and the teacher cannot be expected to do so at the expense of leaving a group of students with severe emotional problems alone in the classroom for even a brief period.

The program proposal being submitted for 1984-85 calls for the Board to provide an aide for each room. Due to the low level of program utilization during 1983-84, however, we are not confident that funding for these positions will be provided. In this event it seems necessary that the staff--both Board and Hawthorn--consider redeployment strategies. Under low enrollment conditions--say 14 or less--one possibility would be to use only two classrooms and to use one teacher in a resource capacity. Other combinations of classroom teacher, resource teacher, and aide deployment could be designed to correspond to various levels of program enrollment.

If the program does reach capacity (30 students according to the 1984-85 proposal), a qualified, full-time aide* should be provided for each room.

In conclusion, we emphasize that the CDTP does fill an important niche in the services provided for the handicapped. Through it children are provided with a range of psychotherapeutic services in conjunction with a strongly individualized

*Particular emphasis on a potential aide's experience and size is critical in staffing a program of this nature.

educational program. Without this program, many participating students would simply be put in a highly restrictive, full-time treatment program and have greatly reduced chances of returning to the educational mainstream.

Prospectus for 1984-85

Many of the discussions and recommendations of this report directly suggest evaluation activities to be undertaken in 1984-85. In addition to these, other areas of potential need have come to our attention from sources other than our specific investigations of this year. The following list outlines what we feel to be the areas of greatest need for evaluation/research activities in 1984-85:

1. As projected in last year's report, a number of data processing programs and procedures that had been developed in the Division of Evaluation and Research were turned over to the Division of Special Education during 1983-84. Again this year programs and procedures have been developed which likewise must complete this turn-key process. The computerized IEP writer (which lacks only an adequate bank of objectives to go into operation) should be brought on line. Other miscellaneous utility programs that provide for batch editing of the TRACK3 file, special purpose reports, etc., should also now be controlled entirely from the Special Education office.

The only computerized processes remaining under the control of the DOER should be those related to the screening program which, due to their dependence on work carried on in the Assessment Center, are more easily coordinated from that office.

We have already made modifications to the TRACK3 system to allow for differentiated security. The four levels established correspond to

A. Normal usage at the school site (i.e., simple access to look up information).

B. Normal usage by personnel of the Pupil Personnel Office (i.e., look-up ability plus the ability to enter students into the system along with their relevant dates in the REDP process.

C. Normal usage at the Special Education Office (i.e., the above capabilities plus the ability to do certain record updates related to IEP's and student placements.

D. Specialized updating capabilities which due to their sensitivity or potential for doing harm to the integrity of the TRACK3 system are reserved to qualified individuals.

This security system will have to be monitored (and probably modified) next year as further data processing capabilities are added at school sites and the Pupil Personnel Division takes over the major responsibility for certain TRACK3 components.

2. This report has already pointed out a number of failings in the special education program which are at least partly related to a poor understanding of P.L.94-142 on the part of non-special education personnel within the school system.

Two years ago a Special Education Staff Development

office was phased out as part of a general reorganization in the district. At that time we had just completed an assessment of system-wide needs in this area. As a result of the reorganization, these plans have never borne fruit. A staff development program should be created to speak to these needs in 1984-85 and it should be evaluated with respect to its adequacy in doing so.

3. We have already noted a potential problem on staff utilization in our discussion of psychologists and the REDP process. This problem may just be symptomatic of a more general one, however. While we have made no formal study of the structure of the Division of Special Education, its administrative positions and their responsibilities, informal observation gives us reason to feel that such a study is in order. Special Education Facilitators have little opportunity to facilitate because of time demands caused by initial IEP's. IEP specialists (who, on the other hand, could conceivably be staffing the initial IEP conferences) are at the same time drafting IEP's (which in some quarters is considered to be a violation of proper IEP procedures). An administrative person enters data on the TRACK3 system. In the meantime, clerks work with an outdated card filing system and type documents that should be word-processed because they have neither the training nor the terminals to use TRACK3 and other computerized systems.

The maintenance of a school system-within-a-system that operates under a more stringent set of regulations is an extremely difficult matter. It needs and deserves all the administrative support that the LEA can give it including an ample, well-trained, and properly deployed staff to carry out its mission. As one basis for judgment we should examine patterns and procedures used in other school systems. If such a study documents important staffing and technical support needs in the Office of Special Education, we hope that they will receive the Board's backing.

4. A general special education field audit should be conducted. We have found such general audits to be a very helpful device in the past, not only in detecting compliance violations but in getting a "feel" for what is happening in special education classrooms as a whole. Particular stress should be placed on the examination of middle school IEP's in keeping with our recommendation that additional mainstreaming should be provided for LD and BD students entering their final year of service in self-contained rooms.

5. The process by which special education classes are assigned to school buildings is in need of examination and revision. Special education classes are generally assigned "leftover" space, putting the school district in a weak position against a charge of discriminating against the

handicapped. A related question regarding the entitlement of the handicapped to participate in magnet schools must also be resolved.

In a related issue, we should also examine the effect of placing students with severe speech and language problems at the Gallaudet School which serves the deaf population. On its face, this does not appear to be appropriate.

The process of examining classroom location and placement procedures has already been begun by the Planning Division but the DOER should provide whatever support is appropriate to this undertaking.

6. A major study of system's compliance with guidelines for the diagnosis and placement of the learning disabled should be carried out in 1984-85 as indicated in the chapter dealing with this topic. The Division should also cooperate in any in-service efforts aimed toward the better understanding of the LD problem on the part of school psychologists.

7. The screening program for special education remains of high priority. Two major steps must be carried out in 1984-85.

A. Criteria for "failure" on the Primary Cognitive Abilities Test must be established and incorporated into the computer program that produces the screening lists.

B. A highly structured follow-up procedure must be developed to ensure that appropriate actions are taking place at the school level after the screening forms have been returned.

**Appendix A--The Division of Special Education
Staff Allocation, 1983-84**

Appendix B
Some Background on the Learning Disabilities Problem

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Number

Title

Special Education Office

1	Director
7	Area Facilitators
1	Coordinator, Contractual Arrangements
1	Coordinator, Data Processing
1	Coordinator, speech & language
4	IEP Specialists
7	Secretaries/clerks
22	<u>Total</u>

Ancillary Staff

22	School Psychologists
18	Psychological Examiners
41	Social Workers
99.5	Nurses
180.5	<u>Total</u>

Teaching Staff

41	BD Teachers
85	LD Teachers
149	EMR Teachers
101	Resource Room Teachers
3	Hospital School Teachers
5	Teachers, Children's Study School
54	Speech & Language Therapists
14	Teachers of Delinquent
3	Sight Conservation Teachers
1	Hearing Impaired Teacher
17.5	Gallaudet School (Deaf)
15.5	Michael School (Physically Handicapped)
489	<u>Total</u>

There is considerable disagreement even among experts as to what "learning disabled" means. For a general definition, let us quote from the man who coined the term "learning disability," Dr. Samuel Kirk:

The global concept of learning disabilities encompasses a number of specific disabilities in children not covered by the traditional handicaps of deafness, blindness, or mental retardation, for whom schools offer special services. It covers a heterogeneous group of developmental delays or disabilities in children including disorders of language, thinking, attention, memory, discrimination, spatial orientation, as well as language and academic subjects.*

While there are elements of specificity here, understanding the practical meaning of "learning disabled" also requires some historical perspective. Over the past 40 years we have seen the learning disabilities program become part of public school education in a four-stage process:

1. The interest of neurologists in adults who had lost the ability to read or speak as a result of brain damage.
2. The extension of this interest to neurologists who were working with children.
3. The management of the problem gradually shifting from neurologists to psychologists and educators.
4. The problem being considered as being an educational one, being dealt with educationally with ancillary help from the psychological and medical professions.

*Kirk, S., "Learning Disabilities: A Historical Note", Academic Therapy, September 1981, 17, 5-11.

In the past decade more and more St. Louis children have received special education services as "learning disabled." Due to the vagueness of the definition almost any student with "normal" intelligence,* can be considered learning disabled if he or she is displaying academic achievement which is not commensurate with that intelligence. In short, LD has come from being a fairly specific concern in neurology to being an educational "catch-all" classification for underachieving students referred to special education.

LD Students in St. Louis High Schools

In order to examine more objectively the effect of the overall LD program on high school students, a study was undertaken in the spring of this year. The files of over 160 learning disabled and EMR students born between September 1963 and September 1966 were randomly chosen and each student's present school status noted. Students were then classified as 1) graduated, 2) exited (special education services no longer needed) 3) dropped out** 4) withdrew (moved or did not enter a St. Louis Public high school) and 5) active (still attending a St. Louis Public

*In Missouri this equates to having an IQ greater than 75, the artificial intellectual border between retardation and normalcy.

**The definition of dropout used here is based on a particular set of withdrawal codes that appear on the student data base.

School and receiving special education services). When the study of LD students serviced in the high school resource program was conducted, data were analyzed on 75 students who had previously been in self-contained learning disabilities classes and entered high school with resource services to be provided. The results of the study for these students were as follows:

Graduated	exited	dropped out	withdrew	active
1	1	26	18	29

Using the ratio of dropouts to dropouts + graduated + active we calculated an estimated dropout rate of 46 per cent for this group.

We next proceeded to analyze the comparable data for 90 STEP students. The results are given in the following chart:

Graduated	exited	dropped out	withdrew	active
2	1	21	25	41

Using the same ratio we calculated a dropout rate of 33 per cent for this sample.

On the basis of the observed data we felt the dropout rate of learning disabled students entering the high school resource program to be disappointingly high with respect to STEP students when one considers that the LD population is considered by the state to be of "normal" intelligence.